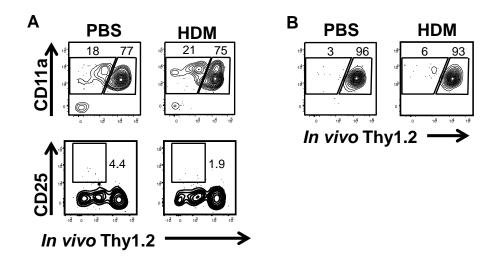
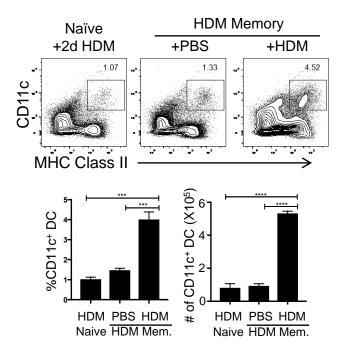


Supplemental Fig. 1. Localization of circulating and tissue resident CD4+T cells in the lung following chronic HDM exposure. HDM treated mice were administered fluorescently-labeled anti-CD4 Ab intravenously (i.v.), and lungs were perfused lung sections were stained with additional antibodies, and visualized by confocal microscopy. Lung section shows staining with the i.v. administered anti CD4 antibody (red), fluorescein-labeled ECL (green) and a second, non-competing anti CD4 antibody (white). Representative image shows the relative localization of i.v. Ab labeled CD4 T cells (red) and CD4 TRM (white) in relation to major lung airway (AW), blood vessel (B). Tunica Media (TM) layer indicated by double arrow. Scale bar represents 100μm.



Supplemental Fig. 2. Lung T cells in naïve mice do not respond to 2d HDM challenge. The frequency of labeled and protected lung CD4+ (A) and CD8+ (B) T cells following i.v. anti-Thy1 Ab administration.in naïve mice treated intranasally with PBS or HDM for 2 days (upper flow plots). The frequency of cells that upregulated CD25 after PBS or HDM challenge (A, lower).



Supplemental Fig. 3. Increase in numbers of lung DC following HDM challenge of HDM memory mice with CD4+TRM. *Top:* Frequency of CD11c+MHChi DCs, in the lungs of naïve and HDM memory mice challenged with PBS or HDM shown as representative flow cytometry plots gated on lymphocytes (A) (n=3-4 mice per group, representative of 3 independent experiments). *Bottom:* Frequency and absolute numbers (mean±SEM) of lung CD11c+DCs from HDM memory mice challenged with PBS or HDM and naïve mice challenged with HDM (* p<0.05, ** p<0.01, **** p<0.0001).